

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Phg</i>		10/19/96
O.I.P.E. CLASSIFIER		12	10/12
FORMALITY REVIEW			

59573  
59523

# INDEX OF CLAIMS

11-1-99  
12-14-99

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Best Available Copy

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If more than 150 claims or 10 actions  
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